Und	er the Paperwork							rmation unle			
	PATEI	VT APPLIC		for Form PTC		ION I	RECORD	7.	Application	n or Docket Nu	mber
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CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL E	NTITY	OR		THAN ENTITY
FOR NUMBER FILED NUMBER EXTRA							RATE	FEE		. RATE	FEG
BASIC FEE (37 CFR 1.16(a)) 39					.]		s	OR ·	Basic	,690	
TOTAL CLAIMS (37 CFR 1.16(c))  39 minus 20 = - 19				<u> </u>	• 5=		OR	is 18 =	342		
INDEPENDENT CLAIMS (37 CFR 1.16(b))  One of the control of the con				$\overline{\cdot}$			OR	x 5 78 =	702		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR + 199)						7	± :		OR	200	
* If the difference in column 1 is less than zero, enter '0' in column 2.							. TOTAL		OR	TOTAL	1,734
					·	<i>:</i> :	TOTAL				17.70
	CLA	JMS AS AME	ENDED →	PARTII		;		•			
		(Column 1)		(Column 2)	Johanne	30	SMALLE	NTITY	OR		R THAN ENTITY
A TV		CLAIMS REMAINING AFTER		HIGHEST DUMBER PREVIOUSLY	+ +41 /4 11 + 414 4		rāi!	ADDI- TIONAL		RAIE	FROM A
ENDMENT	Total	AMENDMETT	Minus	- PAID FOR <b>39</b>	1			Ft.i.			<u> </u>
8	Independent	<u> </u>	Minus		<del>  X -</del>		1 i =	· · ·	OB	- i	
AME	(37 CFR 1 16(b))	-d	<u> </u>	10	<del>/ \</del>		^ 3 <u>"</u>		OR	л š==	-
	FIRST PRESENTAT	FON OF MULTIPLE	i, DEPENDIJI	.1 Cu4.4437 uF	H 11 Copy		+5=		OR	+ 5 =	1
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NT 19		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST MUMBER PREMOUSLY PAID EOR			9415	ADDI HONAL FEE	·	RATE	AIK BOMA FILE
DMENT	Total (37 CFR 1 18(c.)	29	Minus	20	* 1/	_	X 5 =	rec	-		
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AM		<u> </u>		100	<u> </u>	$\dashv$	/. S =		O.P	A 5=	
	FIRST PRESENTATION OF MULTITLE DEPRIMENT (LAMIN SAICHAING):						TOTAL	<del>                                     </del>		TOTAL	1
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	· — —	(Column 1)	<del></del>	(Column 2)	Column	3)			_		· .
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESEI EXTR/		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE
ME	Total (37 CFR 1.15(5))	20	Minus	39	= \/		X. S =	1	OR	50	
AMENDMENT	Independent (37 CFR 1,16(b))	· L/	Minus	12	1 X		,		7	200	-
AME	FIRST PRESENTATION OF THE TIPS E DESCRIPTION OF THE TIPS OF THE TIPS							<del> </del> ·	OR	2/2	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAMM (37 CFR + 19(8))						TOTAL	<u> </u>	.GR	TOTAL	<del>                                     </del>
	If the entry in col	uma 1 ie toes th	an the cot	in column 2 wi	ira 10" in n-1		ADD'L FEE	L	OR	ADD'L FEE	
	" If the "Highest N	umber Previous	ly Paid For	IN THIS SPACE	is less that	n 20 -er	iter "20".				
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The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS, TO. THIS, ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.